

2005 Decision Package Narrative Justification (Form NJ)

1. Agency name: _____ 2. Agency code: _____

3. Decision package number: _____ 4. Title: _____

5. Priority of this decision package: _____

Section 1: General Description

6. Summary of cost

Fiscal year	Dollars		Positions	
	GF	NGF	GF	NGF
FY 2005				
FY 2006				
FY 2007				
FY 2008				
FY 2009				
FY 2010				

7. Description

8. Outcomes/results

9. Consequences of funding/not funding

10. Need for request

11. Alternatives considered

12. Are the proposed services, programs, or activities mandated? ☐ YES ☐ NO
If YES, please explain:

13. Is legislation needed? ☐ YES ☐ NO If YES, please explain:

14. Appropriation Act language needed? ☐ YES ☐ NO If YES, please explain:

Section 2: Cost of request

15. One-time funding? ☐ YES ☐ NO If YES, please explain:

16. Recurring need? ☐ YES ☐ NO If YES, please explain:

17. Personal services? ☐ YES ☐ NO If YES, fill in table below:

Position (Role) Title	Expected hire date	Band	Starting salary	\$ cost of salary & fringe benefits

(Insert additional rows as needed)

18. Nonpersonal services? ☐ YES ☐ NO If YES, fill in table below:

Expenditures	FY 2005 CHANGE		FY 2006 CHANGE	
	GF	NGF	GF	NGF
Contractual Services				
Supplies & Materials				
Transfer Payments				
Continuous Charges				
Property & Improvements				
Equipment				
Plant & Equipment				
Obligations				

Explain below:

19. Nongeneral fund sources? ☐ YES ☐ NO If YES, fill in table below:

Revenue Source Code	Fund/ Fund Detail Code	Fund/Fund Detail Title	FY 2005 amount	FY 2006 amount

Explain below:

20. Grant funds? ☐ YES ☐ NO If YES, explain below:

21. Methodology for cost of proposal

Section 3: Measuring Results

22. What is the specific outcome you are expecting if this request is funded? Also indicate if this is a new activity for your agency.

23. Performance measure in *Virginia Results*? ☐ YES ☐ NO

If YES, please state the measure
